

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10636129

FILING DATE

08-11-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		0				
8		0				
9		0				
10		0				
11		0				
12		0				
13		0				
14	1					
15		1				
16	1					
17		1				
18	1					
19		1				
20	1					
21		1				
22	1					
23		1				
24		1				
25		2				
26		2				
27	1					
28		1				
29		1				
30		2				
31		1				
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48						
49						
50						
TOTAL IND.	7					
TOTAL DEP.	27					
TOTAL CLAIMS	34					

	IND		DEP		IND		DEP		IND		DEP	
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
51												
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TOTAL DEP.												
TOTAL CLAIMS												